INDIVIDUAL CONTRACTING ACTION REPORT											RT		REPORT CONTROL SYMBOL									
PAR'	U Original I Cancelling I					A2. REPORT NO.			A3. CONTI	FFICE	CE A4. NAME OF CONTRACTING			OFFICE	OFFICE							
PAR B	T B1. CONTRACT NUMBER					·		B2. MOD	ORDER OR	OTHER ID	THER ID NUMBER			83. ACTION		ION DA			OMPLETIC (YYMMDD			
B5. CO	NTRA	CTOR ID	ENTIFIC	ATION IN	ORMA	TION	85A.	ESTABLISH	IMENT COD	E						B5B. CA	GE CO	Œ				
BSC. CO	ONTR	ACTOR I	NAME A	ND DIVIS	ION NA	ME					BSD. CONTRACTOR ADDRESS (Street, City, State, Zip Code)											
BSE. TIN BSF. PARENT TIN											B5G. P	AREN	NT NAME									
B6. PRINCIPAL PLACE OF PERFORMANCE B6A. CITY OR PLACE						PLACE C	CE CODE B68.			TE OR COL	INTRY COE	RY CODE BEC. CITY OR PLACE STATE OR COUNTRY NAME							:			
B7. TYPE OBLIGATION						B8. TOTAL DOLLARS (Enter whole) B9. FO								AL MULTIYEAR VALUE				
	1 Obligation 2 Deobligation				on					,	SALE Y Yes N No		lo_	CONTRACT Y Yes N No			(Enter whole dollars only)					
PROI	2. PRINCIPAL B12A. FSC OR SVC PRODUCT OR CODE SERVICE			c	B12B. DOD CLAIMANT PROG. NO.			B12C. SYS' EQU	TEM OR 812D. SIC			CODE		B12E. N	AME / DESCRI	TION			d			
B13. K				G ACTION					·		- 	-		!	<u></u>	М	ODIFICA	TION				
	3	Initial Le Definition Superse Definition Order U	ve Contr ding Let ve Contr	act iter Contra act	ct		6 Order/Modif 7 Order Under 8 Action With			DoD Contract fication Under Federal Sch Another Agency's Contra Another Federal Agency ise Procedure		nedule B			(new	Additional Work (new agreement) Additional Work (other) Funding Action			D Change Order E Termination for Default F Termination for Convenience G Cancellation			
PART	PART C (Do Not Complete This Part If Item B9 Above is Coded Y or If Item B13 is Coded 8)																					
C1. SY	NOPS	is	C2. RE	ASON NO				COMPETED		1 3 2 4 7			TITIVE C									
	1	Yes A Urgency B Not A Comp No B Other than C Follow							ole for Comp to Competed eted			A Price Competitive B Design/Technical Competit C Follow on After Price Comp D Follow on After Design/Tec				npetition	petition F Non-Competitive - Other					
C5. TY		F CONTR		otor=-:-	on	•	E1	d Delen '	ntius	11 6	ne Dive T			C6. NUI	MBER OF	OFFERORS	1	C7. N	UMBER OF	OFFERS RE	CEIVED	
	J Firm Fixed Price R Cost Plus Award Fee V K Fixed Price Economic Price S Cost Contract Y Adjustment T Cost Sharing Z											t Plus Fixed Fee SOLICITED a and Materials or Hours SOLICITED 1 One 2 More th					1 One 2 More than one					
C8. SO		ATION P			Saala-	הוח			tornata Ca	Bad	d Cost		C9. AU			HER THAN F	ULL &					
	A Full & Open Competition - Sealed Bid B Full & Open Competition - Competitive Proposal C Full & Open Competition - Combination D Architect - Engineer E Basic Research F Multiple Award Schedule A Full & Open Competition - Combination C Full & Open Competition - Combination D Architect - Engineer C Full & Open Competition - Combination C Full & Open Competition - Combination C Full & Open Competition - Combination C Full & Open Competition - Competitive C Full & Open Competition - Competition C Full & Open C										zation D Statute	18							& D Capab nai Agreem d by Statut d Resale ecurity	nent		
C10. SUBJECT TO LABOR STANDARDS STATUTES C11. CERTIFIED COST OR PRICING DATA A Walsh - Healey Act, C Service Contract Act Manufacturer D Davis - Bacon Act Walsh - Healey Act, Dealer Z Not Subject to Above C12. CONTRACT FINANCING (Progress Payments (PP) or Advance Payments (AP)) A DFARS Clause 252.232-7007 C Percentage of Completion or FAR Clause 52.232-16 D Unusual PP or AP Whot Obtained Waived B DFARS Clause 252.232-7004 Z None of the Above																						
C13. C13A. NUMBER OF OFFERORS C13B. BUY AMER								ot Obtaine T PERCENT	ICE	C13C. P	LACE O	ACTURE	CTURE C13D. COU			of the Above TRY OF ORIGIN CODE						
TRADE		ГА						i .	#L!- = -	NO. 4.	Above to Goded View 15											
PART D (Do Not Complete This Part If Item B9 Above is Coded Y or If Item B13 is Coded 6 or 8) D1. TYPE OF BUSINESS (Make one selection) D2. REASON NOT AWARDED TO SMALL D3. REASON NOT AWARDED TO																						
	A Small Disadvantaged Business Performing in U.S. Other Small Business Performing in U.S. C Large Business Performing in U.S. D Workshop for the Blind or Other Severely Handicapped Hospital C Under Severely Hospital C Other Nonprotesta								Performing ack College stitutions (onal	s & Universi	tside U.S. A No Know B SDB Not: U.MI) C SDB Solic D SDB Solic			VANTAGE Known S B Not Sol B Solicite	AGED BUSINESS (SDB) in SDB Source Solicited cited. No Offer cited. Offer Not Low ason			D3. REASON NOT AWARDED TO SMALL BUSINESS (SB) A NO KNOWN SB Source B SB Not Solicited C SB Solicited. No Offer D SB Solicited. Offer Not Low Z Other Reason				
PREFE		E 4		E OF SB S			aina	D48.	TYPE OF SD		E/SDB PRI SDB Pre			D4C.	HBCU/MI	SET-ASIDE	D4D. (PREFERENCE GRAM		D4E. PREMIUM	
PRO	ROGRAM B Total SB Business Set- Set-Aside Z Small Business- D Combined SB / Labor Surplus Area Set-Aside E Total SDB Set-Aside							B Section C Total Set-A D SDB B Prefe Unre	on 8(A) SDB side valuation rence- stricted	Conside Partial S Aside	Consideration- Partial SB Set- Aside			B HBCU or MI - Total Set- Aside C HBCU or MI - Partial Set- Aside			A Directed to Workshops B Partial Labor Surplus Area (LSA) Set-Aside C Tie-Bid LSA Preference Z None of the Above			PERCENT		
	A Asian-Indian American F Other B Asian-Pacific American Certified C Black American Z No Repre- D Hispanic American sentation E Native American U Uncertified										77. SMALL BUSINESS INNOVATION RESEARCH (SBIR) PROGRAM A Not a SBIR Phase I / II B SBIR Program Phase I Action C SBIR Program Phase II Action D8. SUBCONTRACTING PLAN - SI A Plan Not Included - No Subcontracting Possibilities B Plan Not Required						ed ting	C Plan Required, Incentive Not Included D Plan Required, Incentive Included				
D9. D		STRATIO	ON TEST	7 0	10. SIZ			BUSINESS	: .	or AVER	AVERAGE ANNUAL GROSS REVENU					1			D11. EMERGING SMALL BUSINESS			
	Y Yes A B C C D					A 50 B 51 - C 101	51 - 100 F 751 - 1,000 101 - 250 G Over 1,000			M 1 N 1 P 2	,000,000 o ,000,001 - ; ,000,001 - ;	0,000 or Less 0,001 - 2,000,000 0,001 - 3,500,000 0,001 - 5,000,000			T 10,000,001 - 17,000,000 U Over 17,000,000			Y Yes N No				
PAR	ΤE	E1		E	2			E3		E4		E	5		E6		E.	7		E8	*	
PAR	T F	F1. NA	ME OF	CONTRAC	TING (OFFICER	OR RI	PRESENTA	TIVE	F2. SIGN	ATURE	L_					F:	3. TELE	PHONE NO.	F4. DATE	(YYMMDD	